

**STATE OF NEW YORK
STATE BOARD OF ELECTIONS
COMMITTEE DESIGNATION OF TREASURER AND DEPOSITORY
Section 14-118 of the Election Law**

(See instructions on reverse side)

New Registration []
Amended Registration []

Committee identification No.
(to be assigned by the Board)

A. NAME OF COMMITTEE: _____

B. COMMITTEE TYPE: _____
(see reverse)

C. Section Must Be Completed in Full

C. TREASURER:

Full Name	_____
Res. Address	_____ _____ _____
Soc. Sec. # (voluntary)	_____ Zip _____
E-mail address	_____
Mailing Address (if different)	_____ _____ _____
	_____ Zip _____
Res. Tel. No.	_____ Bus. Tel. No. _____

D. DEPOSITORY:

Name of Bank	_____
Address	_____ _____ _____
	_____ Zip _____

E. CANDIDATE(S) TO BE SUPPORTED:	ELECTION YEAR	OFFICE AND DISTRICT	FIRST NAME AND MIDDLE INITIAL OF CANDIDATE	LAST NAME OF CANDIDATE
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

F. BALLOT ISSUE(S) TO BE SUPPORTED OR OPPOSED:

1. _____

2. _____

G. PERSON(S) OTHER THAN TREASURER AUTHORIZED TO SIGN CHECKS:

Full Name 1. _____	2. _____
Res. Address _____	_____
_____ Zip _____	_____ Zip _____
Signature _____	_____

H. _____ The above information is true to the best of my knowledge and belief

CF-02 2/02 _____ Date _____ Signature of Treasurer _____

INSTRUCTIONS FOR COMPLETING FORM CF-02

(PLEASE PRINT OR TYPE IN BLACK INK)

This form must be filed by all political committees as defined in Section 14-118 of the Election Law with the exception of constituted committees. **It is due within five days after the choice of a treasurer and depository, and prior to receiving or expending any funds.** It must contain original signatures. Faxed or photocopied signatures are not acceptable.

Candidates themselves are not required to file this form.

SPECIFIC INSTRUCTIONS

Type of registration:

1. All new committees shall check the new registration box.
2. If any of the information provided on this form changes, other than the year of election, the treasurer must file an amended registration statement within two days.

Identification No.: This number will be assigned to the committee by the Board of Elections after the filing of the registration statement and should be used on all documents and correspondence.

Note: Some county boards of election do not use identification numbers.

Item B: Committee Type: Select one of the following types;

- | | | | |
|---|--------------------|----|-------------------|
| 1 | Authorized* | 5 | Constituted State |
| 2 | PAC | 6 | Party State |
| 3 | Constituted County | 9 | Others |
| 4 | Party County | 9B | Ballot Issue |

* The candidate has affirmatively acknowledged that this committee will be raising and spending money on their behalf. (e.g. Friends of John Doe)

Item C: Social Security #. We are requesting your social security number to more precisely identify those persons who fail to comply with campaign financial disclosure requirements. Disclosure of this information is strictly voluntary.

Item D: Only a banking organization authorized to do business in New York State may be designated a depository.

Item E: This section should only be completed by committees that engage in campaign activity support of or in opposition to a candidate. It should not be completed by a committee that only makes contributions to candidates or their committees. In addition to the CF-02, the CF-03 Committee Statement of Authorization or Non-authorization by Candidates must be filed by this committee for all candidates listed in this section.